

Objectives

1. List collaborating partners that can help children receive at least 1 oral health screening and dental referral annually.
2. Identify access barriers to children's oral health care in your county.
3. List countermeasures for barriers to children receiving oral health screenings and dental care.

Healthy People 2010 Goals

Dept of Health and Human Services (2000)

Goal 21-2b: Reduce the proportion of children with untreated dental decay in their primary teeth and permanent teeth.

Goal 21-12: Increase the proportion of low-income children and adolescents who received any preventive dental service during the past year.



Should we be concerned?



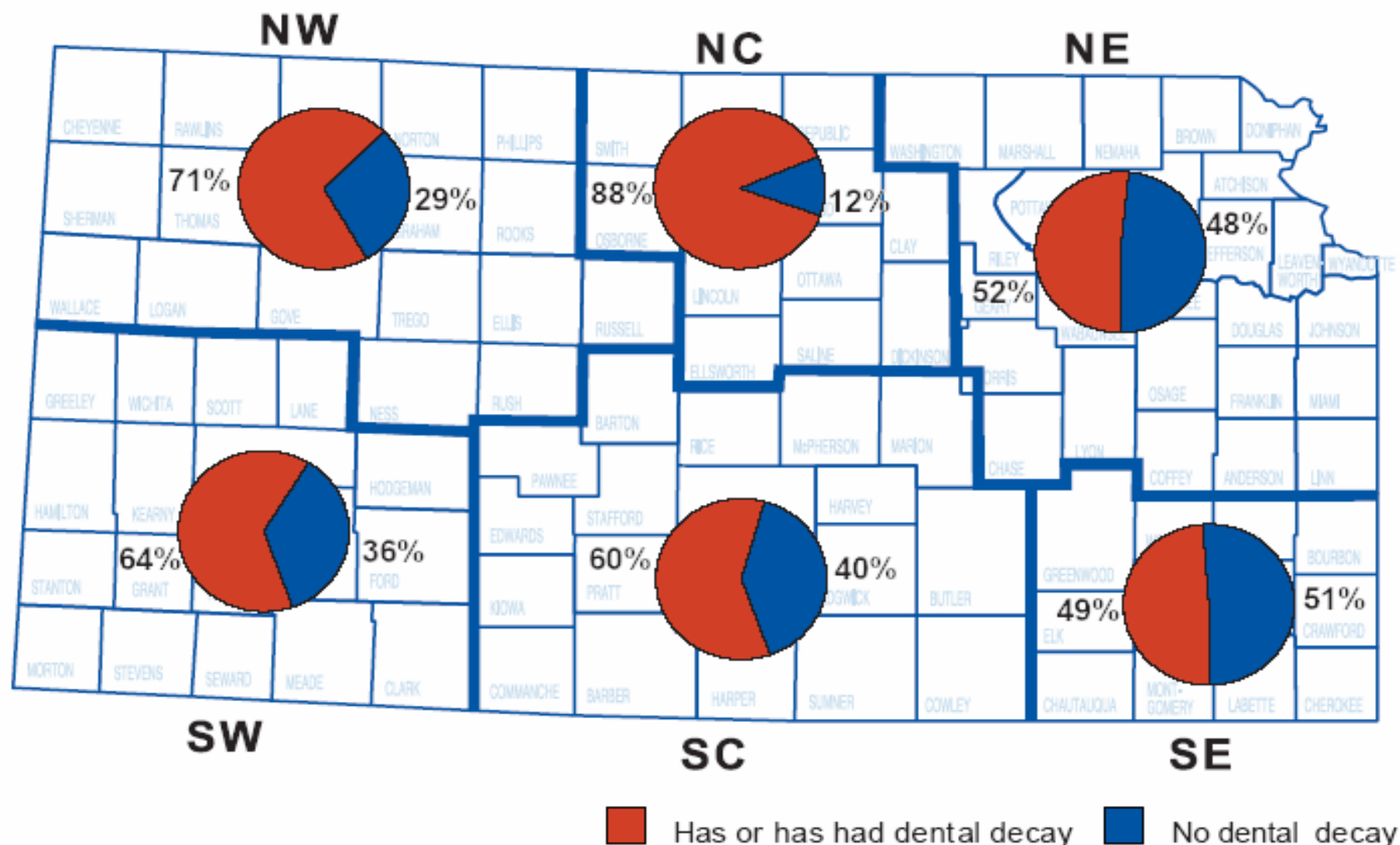
Identify Community Health Problems

- More than 50% of 7-9 year olds in Kansas suffered the damaging effects of tooth decay.
- Dental sealants are underutilized. Only 3 in 10 children have sealants.
- Children eligible for free or reduced-price school lunches had worse oral health.

2004 Smiles Across Kansas Survey

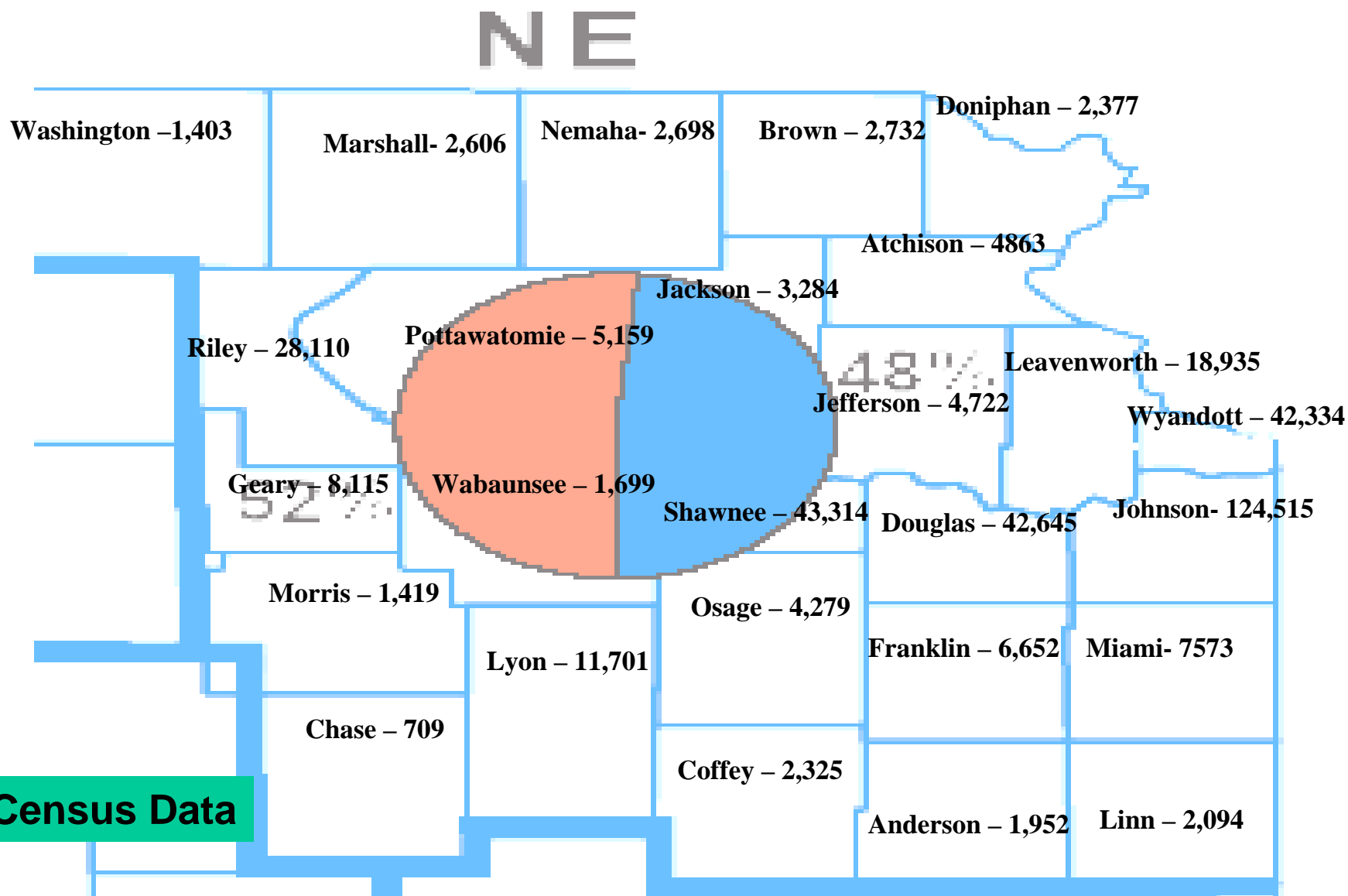
(KDHE and Kansas Health Institute)

FIGURE 2 – PERCENT OF CHILDREN WITH DENTAL DECAY BY REGION



From KDHE & NIH study: Smiles Across Kansas 2004

About 196,797 kids or 52% of the Northeast Region's 378,455 kids have or have had dental decay!



What should we teach them?



The Mission: Inform, Educate, Empower

- Dental Decay is Preventable.
- Factors that cause decay can be reduced:
 - Oral Hygiene
 - Diet
 - Routine Dental Visits
 - Early Intervention

Oral Infections and Overall Health

- Oral infections have been associated with:
 - Diabetes
 - Heart Disease/Stroke
 - Pre-term Birth
 - Low Birth Weight



Oral Health and Physical Health Link

Oral Health Affects:

Diet, Nutrition, Sleep, Psychological Status

Social Interaction





Poor Dental Health **Disrupts Children's Lives**

- Pain caused by tooth decay interferes with children's ability to concentration in school.
- Children lose time in school due to pain from decayed teeth.
- Parents miss work while attending to children with poor dental health.

Action and Education **Safeguard Children's Oral** **Health**



- Decayed teeth alter the child's appearance, speech, and self esteem.
- Infection from tooth decay affects the immune system and can lead to other illnesses.
- Unbearable pain from tooth decay can result in costly emergency room visits.

Community Collaboration to Achieve Children's Dental Health



Community-based organizations working together to:

- Facilitate access to children's dental care.
- Provide education on early dental care for children.
- Promote medical/dental insurance plans for children in poverty.

Geary County Facts

2006 Kansas Kids Count Data

Population Size	25,111
Median Income	\$41,900
Caucasian	69.2%
African-American	20.2%
Asian	4.9%
Native American	1.0%
Ethnic Hispanic	7.1%



School Aged Children

USD 475 website Data



No. enrolled (2005-2006)	6,226
Percent in Poverty	53%
Caucasian	52%
African-American	25%
Other	14%
Ethnic Hispanic	9%

“What should we do?”

Assessment



Geary County Survey conducted in 2003 by Ed Fonner, Dr. P.H. Kansas Health Institute.

- Access to dental care one of the top concerns in Geary County.
- Need for dental education
- Lack of health and dental Insurance

Barriers to Children's Dental Health **in Geary County**



- 53% of Geary County's 6226 kids (3300 kids) impoverished.
- One dentist took HealthWave or Medicaid.
- From 9/2004 –9/2005, only 350 the county's 3300 children in poverty received HealthWave. (SRS Statistics).

Identify Kids in Geary County that Need Dental care.
Is Race or Income Important?

Geary County children in pre-school through 8th grade
Sample size: 138

<u>Category Race</u>	<u>Number</u>
White	82
Black	56

<u>Category Poverty</u>	<u>Number</u>
Above Poverty	84
Below Poverty	54



Chi-square Results for Race and Income

RACE

Cavities

No Cavities

Black

10

46

White

21

61

P-value = .28

INCOME

Cavities

No Cavities

Above

13

71

Below

16

38

P-value = .05

Sample size: 138 (28% needed Dental Care)

Study results suggest that income and race have no effect on the presence of children's tooth decay in Geary County for at least 2 races.



Education Intervention

An Oral Health Campaign that Appeals to a Culturally and Economically Diverse Population.





Geary County Community Strengths **Empower Collaboration**

- **Community pride**
- **Commitment to building a strong community**
- **Involved grassroots leaders**
- **Diversity: Different ethnicities/walks of life**
- **Leaders and citizens identify problems**
- **History of successful community change**

KDHE Oral Health Assistance Light at the End of the Tunnel



- In 2004 KDHE Dawn McGlasson, Deputy Director of Oral Health, demonstrates fluoride varnish applications at Kansas Public Health Nursing Conference.
- KDHE offered diagnodent oral screening training to health department nurses.
- Health department and school district submitted grants to KDHE and received diagnodent machines.
- Health dept nurses train school nurses on diagnodent screenings procedures.



Goal: Provide fluoride varnish and diagnodent screenings to Geary County school children.

Collaborators:

- Health Department Nurses
- School Nurse Supervisor
- Associate Superintendent of School District
- Director of the Boys/ Girls After School Club
- School Principals and Teachers
- Local Dentists to Provide Services for Referrals Needed



Results:

- Health dept and school nurses performed oral health screenings in schools and health fairs
- Associate Superintendent funded non-Medicaid insured students with school district grant funding.

Goal: Ensure That Children In Geary County Who Qualify For Health Wave Submit Application.

Collaborators:

- Bank President
- School Superintendent, Principals, Teachers
- Hospital Executive Officer
- Health Department Nurses, Health Educator
- Geary Community Healthcare Foundation
- Health Fair Volunteers
- Federally Funded Healthcare Clinic

Results:

- Many people who qualify for Health Wave received assistance in filling out applications.



Goal: Establish Dental Clinics and Mobile Dental Service that will take Children with Medicaid/HealthWave Insurance.

Collaborators:

- Geary Community Healthcare Foundation
- School Superintendent, Principals, Teachers
- Hospital Director and Executive Officer
- Health Department Administrator Nurses, Health Educator
- Geary County Health Care Foundation
- Federally Funded Healthcare Clinic
- Dentists/ Dental hygienists
- Reachout Healthcare America

Results:

- Reachout Healthcare America visits schools with mobile dental.
- New Pediatric Dentist Office opens in Junction City that takes Medicaid.
- Konza Prairie to open dental clinic in fall 2007 that takes Medicaid and sliding fee scale.



Future Goal: Regional Collaboration for Kid's Oral Health



Geary County, Riley County, Pottawatomie County